

**B. Areas of State in which services will be provided:**

☒ Entire State

☐ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide).

**C. Comparability of Services:**

☐ Services are provided in accordance with Section 1902(a)(10)(B) of the Act.

☒ Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

**D. Definition of Services**

Case Management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for Medicaid eligible adults with AIDS who are at the greatest risk of hospitalization and need assistance with acute problem solving. The purpose of case management is to assist individuals in the target group in gaining access to needed medical, nutritional, social, educational, psychological, transportation, housing, legal, financial, and other services; and to reduce the incidence of costs of hospitalization by encouraging the use of various community resources through referral to appropriate providers.

TRANSMITTAL 92-40  
APPROVED 1-28-93  
EFFECTIVE 10-1-92  
SUPERSEDES (ntw)

The set of interrelated activities is as follows:

1. Obtaining a medical assessment from the recipient's primary physician; or physician, physician's assistant or nurse practitioner of the recipient's choice; conducting a psychosocial assessment in order to establish a comprehensive case file for the development and implementation of an individualized service plan to meet the assessed service needs of the eligible Medicaid recipient with AIDS. Establishing priorities for the initial linkages with providers. This unit of service may be billed only once for each eligible recipient.
2. Assisting the eligible recipient with AIDS in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan.
3. Monitoring and following-up with the eligible recipient and service providers to determine that the services received are adequate in meeting the recipient's assessed needs. Case management follow-up services are limited to twelve (12) visits annually.
4. Providing reassessment of eligible recipients with AIDS to determine the services needed to resolve any crisis situation resulting from changes in the recipient's medical condition, loss of social support, employment, housing, legal problems or other significant events. This level of follow-up services is limited to three (3) services annually.

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TN No. 99-006  
Supersedes Approval Date AUG 1999 Effective Date APR 1999  
TN No. 92-040

E. Qualifications of Providers:

1. Provider Qualifications

Enrollment will be accomplished in accordance with Section 1902(a)(23) of the Act. Enrollment is open to all providers who can meet the following requirements:

- a. Must have qualified case manager(s) and the capacity to provide the full range of case management services.
- b. Must meet the applicable state and federal laws governing the participation of providers in the Medicaid program.
- c. Providers must have one (1) or more documented years experience in providing case management services to HIV disabled individuals.
- d. Providers must have a financial management system that provides documentation of services and costs.
- e. Case managers must have the equivalent of a high school diploma and meet one of the following:

have at least two years of documented, verifiable case management experience or social services related work experience, coordinating activities to individuals with HIV/AIDS or other Acute or Chronic diseases

OR

hold a certificate of training in a social services area with one year of related training or work experience

OR

be a licensed registered nurse (RN), or licensed practical nurse (LPN), with one year of related training or work experience

OR

hold an Associate, Bachelor's or Master's degree with one year of any combination of related courses, training or work experience.

- f. Case Managers must have at least one year experience in a social services delivery system.
- g. Case Managers must have considerable skill in the methods of locating, developing, and coordinating the provision of supportive services in the community for the AIDS disabled individual.

TN No. 98-008

Supersedes Approval Date 12/9/98

TN No. 93-012

Effective Date 7/1/98

SUPPLEMENT 1 TO ATTACHMENT 3.1-A  
Page 5 (Part J)

- F. The state assures that the provision of the case management services will not restrict an individual's free choice of providers in violation of Section 1902(a)(23) of the Act.
1. Eligible recipients will have free choice of the providers of case management services.
  2. Eligible recipients will have free choice of the providers of other services under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

TRANSMITTAL 92-40  
APPROVED 1-28-93  
EFFECTIVE 10-1-92  
SUPERSEDES (new)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Georgia

CHILDREN AT-RISK CASE MANAGEMENT SERVICES

A. Target Group:

EPSDT eligible children who are "at-risk" of not completing a secondary education program because they exhibit three or more of the following characteristics:

1. Developmental screen indicates the child is not meeting developmental milestones.
2. No EPSDT initial screen or no periodic screening.
3. Few friends or school alienation.
4. Little or no extracurricular involvement.
5. Frequent disciplinary referrals.
6. Dysfunctional home situation.
7. Mental health diagnosis.
8. Single parent family.
9. One or more grade retentions.
10. Born to a teenage mother.
11. Born to a parent who has not completed High School.
12. Five or more unexcused absences in any one twenty (20) day attendance period.
13. Limited English proficiency.
14. Transferred two or more times during the most recent school year.
15. One or more years below grade placement in reading or math.
16. Free or reduced price lunch.
17. Lack of appropriate physical necessities (clothing, proper hygiene, etc.)

TRANSMITTAL 93-019  
APPROVED 4-14-94  
EFFECTIVE 4-1-93  
SUPERSEDES NEW

18. History of exposure to direct or indirect violence.
19. History of sexual or physical abuse or neglect.
20. Teenagers between the ages of 16 and 20 who have dropped out of school and who are willing to complete a planned educational program leading to a high school diploma or GED.
21. Pregnancy.

B. Areas of State in which services will be provided:

☐ Entire State.

☒ Only in the following geographic areas (authority Section 1915(g)(1) of the Act is invoked to provide services less than statewide):

Chatham County, Georgia

Comparability of Services

☐ Services are provided in accordance with Section 1902(a)(10) of the Act.

☒ Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

D. Definition of Services

Children at-risk case management is a set of interrelated activities identifying, coordinating, and reviewing the delivery of appropriate services for eligible at-risk children. The purpose of case management services is to assist those targeted at-risk children in gaining access to needed medical, nutritional, social, educational, transportation, housing, and other services, and to encourage the use of various community resources through referral to appropriate providers. Case management services will provide necessary coordination with the providers of health, family support, employment, justice, housing, counseling, nutrition, social, educational, transportation, and other services when needed.

TM Mo. 97-006

Supersedes

TN No. 95-018

Approval Date

9/30/97

Effective Date

7/1/97

The set of interrelated activities are as follows:

1. Establishing the comprehensive case file for development and implementation of an individualized service plan to meet the assessed service needs of the eligible child. Establishing priorities for initial linkages with providers. This unit of service may be billed only once for each eligible child.
2. Assistance to the eligible child in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan.
3. Monitoring and follow-up with the eligible child and service providers to determine that the services received are adequate in meeting the child's assessed needs. Case management follow-up services are limited to 12 visits annually.
4. Reassessment of eligible children to determine the services needed to resolve any crisis situation resulting from divorce, death, separation, family structure changes, changes in living conditions, or other events.

E. Qualification of Providers

1. Provider Qualifications

Enrollment will be accomplished in accordance with Section 1902(a)(23) of the Act. Enrollment is open to all providers who can meet with following requirements:

- a. Must provide the full range of at-risk case management services.
- b. Must meet the applicable state and federal laws governing the participation of providers in the Medicaid program.

ENR 93-19 5-10-94  
New 4-14-94  
4-1-93

SUPPLEMENT 1 TO ATTACHMENT 3.1-A  
Page 4 (Part L)

- c. Must have demonstrated direct experience in the coordination of educational support services (e.g., EPSDT, Social Services, Counseling Services, Psychological Services, Student Assistance, Special Education, and Nutritional Services).
- d. Must have demonstrated the ability to obtain collaboration between public and private services providers.
- e. In order to avoid duplication of services and to promote effective community level networking, case management providers must have signed a collaborative agreement with the Chatham County Health Department, Chatham County Department of Family and Children Services, Chatham County Juvenile Court, Chatham County Division of Children and Youth Services, and The Tideland's Mental Health, Mental Retardation and Substance Abuse Program.
- f. Case management supervisors must hold a Master's Degree in a human services field (i.e., psychology, sociology, social work, humanities, counseling, career services and have two years of supervisory experience working with low income indigenous children and their families.
- g. Case managers must have a high school diploma or equivalent and have one year of experience working with low income families and their children.

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|--------|-------------|----------------|---------|
| IN No. | 93-19       | DATE/RECEIPT   | 5-10-93 |
|        | SUBMITTER'S | DATE/APPROVED  | 4-14-94 |
| IN No. | New         | DATE/EFFECTIVE | 4-1-93  |



- h. Case Management Supervisor(s) and Case Managers must complete a pre-service training program and a Youth Futures designed and supervised practicum experience.
- F. The state assures that the provision of case management services will not restrict an individual's free choice of providers in violation of Section 1902(a)(23) of the Act.
  - 1. Eligible recipients will have free choice of the providers of case management services.
  - 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose. Reimbursement methodology is reported on Attachment 4.19-B, pages 5d and 5e.

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|-------|----------------|---------|
| 93-19 | DATE/RECEIVED  | 5-10-93 |
|       | DATE/RECEIVED  | 4-14-94 |
| New   | DATE/EFFECTIVE | 4-1-93  |

**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT**

State/Territory: Georgia

**PERINATAL CASE MANAGEMENT SERVICES/AREA C**

**A. Target Group:**

Medicaid eligible pregnant and post-partum women and their infant(s) in Area C of Savannah will be covered until the child(ren) from that pregnancy reaches age one year.

**B. Areas of State in which services will be provided:**

☐ Entire State.

☒ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide):

The street boundaries for Area C are West Victory Drive to Ogeechee to Kollock to West 34th to West Anderson to May to West Gwinnett to West Boundary to West Jones to Purse to West Charlton to West Harris to East Harris to Price to Liberty to Wheaton to Waters back to West Victory and across East Victory.

**C. Comparability of services:**

☐ Services are provided in accordance with Section 1902(a)(10)(B) of the Act.

☒ Services are not comparable to amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

**D. Definition of services:**

Perinatal Case Management Services/Area C is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for eligible recipients. The purpose of case management services is to assist those targeted in gaining access to needed medical, nutritional, social, educational, transportation, housing, and other services; and to encourage the use of various community resources through referral to appropriate providers. Case management services will provide necessary coordination with providers of health, family support, employment, justice, housing, counseling, nutrition, social, educational, transportation, and other services when needed.

TRANSMITTAL 93-030  
APPROVED 5-4-94  
EFFECTIVE 4-1-93  
SUPERSEDES NEW